

CITY COUNCIL REPORT



Meeting Date: October 18, 2011
 General Plan Element: **Land Use**
 General Plan Goal: *Sensitively integrate land uses into the surrounding setting.*

ACTION

Beer and Wine Bar Liquor License Request for AZ Wine Co. 103-LL-2011. To consider forwarding a recommendation to the Arizona Department of Liquor Licenses and Control for a Person and Location Transfer of a Series 7 (beer and wine bar) State liquor license for an existing location and owner.

OWNER

AZ Wine Co, Paradise Valley Wine Outlet LLC

APPLICANT CONTACT

Raymond Kemp

LOCATION

2515 N Scottsdale Rd. #15



BACKGROUND

This request is for a Person and Location Transfer of a Series 7 (beer and wine bar) liquor license. This has been a licensed location since 1993, most recently operating with liquor as AZ Wine Co. with a Series 6 (bar) license. Due to the new state requirements, the owner must replace the Series 6 (bar) license with a Series 7 (beer and wine bar license) and a Series 9 (all spirituous liquor store). Once the Series 7 has been approved, the applicant will submit the Series 9 application.

The zoning for this site is Highway Commercial District (C-3), which allows retail stores. This establishment is 5,672 sq. ft.

APPLICANT'S PROPOSAL

The applicant is seeking a favorable recommendation on a Person and Location Transfer of a Series 7 liquor license. This allows a beer and wine bar retailer to sell and serve beer and wine, primarily by individual portions, to be consumed on the premises and in the original container for consumption on or off the premises.

PETITIONS FROM PERSONS IN CLOSE PROXIMITY

The applicant has maintained the required posting notice for the State mandated 20-day period. No petitions or protests pursuant to A.R.S. 4-201.b. were received during the 20 (twenty) day posting period.

OTHER LICENSES & PERMITS

Financial Management

Revenue Collection has reported that the applicant has met City licensing requirements and all fees have been paid.

Spirituos Liquor Tax Permit # Pending.

Scottsdale Transaction Privilege Sales Tax License # Pending.

IMPACT ANALYSIS

Current Planning Department.

There will not be any significant changes to the floor plan.

This owner intends to continue operating this location as a retail wine store.

Public Safety Division.

Police Department: Recommendation Approval

Major life safety issues: None noted.

Code Enforcement: There are no current cases of code violations at this time relevant to the liquor license.

STATE GUIDELINES FOR CONSIDERING AN APPLICATION

A.R.S. Section 4-203.A Granting a License for a New Owner for a Certain Location.

A spirituous liquor license shall be issued only after satisfactory showing of the capability, qualifications and reliability of the applicant.

COUNCIL OPTIONS & STAFF RECOMMENDATION

Council Options

The City Council has the option of recommending approval, denial or no recommendation to the Arizona Department of Liquor Licenses and Control.

Staff Recommendation

The City of Scottsdale staff has conducted a review and advises that the license request meets the criteria imposed for determining the capability, qualifications and reliability of the applicant.

Next Steps

The City Council's recommendation of approval, denial or no recommendation will be forwarded to the Department of Liquor Licenses and Control for their consideration. If the application is approved by the Department of Liquor Licenses and Control, the applicant should receive their license from the State within 105 days of original application.

RESPONSIBLE DEPARTMENT(S)

Adam Yaron, Planner, ayaron@scottsdaleaz.gov
Planning, Neighborhood and Transportation Division

Tom Henny, Commander Downtown Patrol District, thenny@scottsdaleaz.gov
Public Safety Division

Malcom Hankins, Code Enforcement Manager, mhankins@scottsdaleaz.gov
Economic Vitality Division

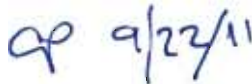
APPROVED BY

Tim Curtis, AICP, Current Planning Director
312-4210 tcurtis@scottsdaleaz.gov



9/21/2011

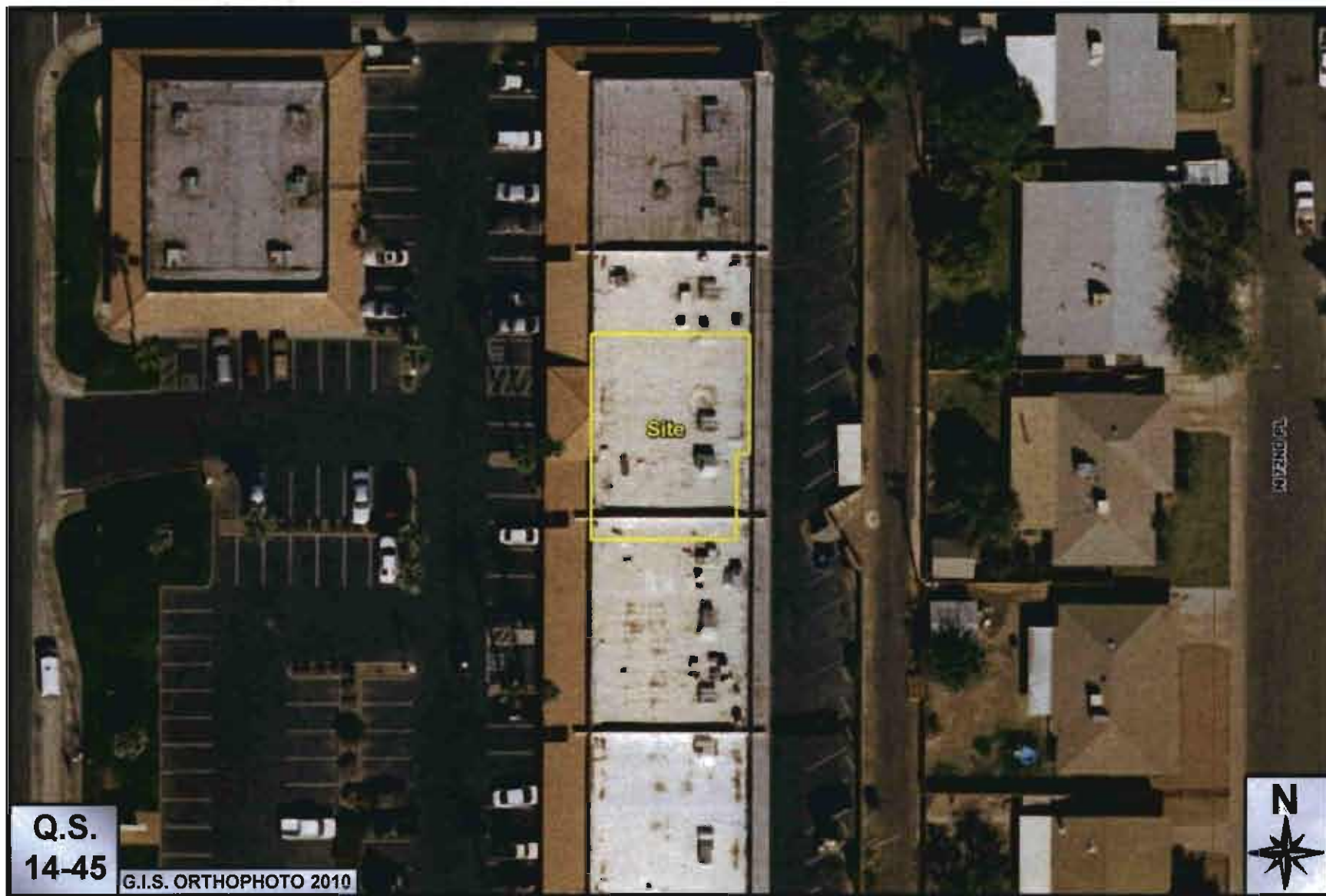
Connie Padian, Administrator
312-2664, cpadian@scottsdaleaz.gov



ATTACHMENTS

- #1: Aerial Map
- #2: Close-up Aerial Map
- #3: City of Scottsdale Applicant Questionnaire
- #4: State Application Sections 1-17
- #5: State Background Information

ATTACHMENT #1



Q.S.
14-45

G.I.S. ORTHOPHOTO 2010

103-LL-2011

ATTACHMENT #2

AZ Wine Company



Liquor License Questionnaire

Please complete all questions and return within 3 business days.

Name of Business: AZ Wine Co

Business Address: 2515 N. Scottsdale Road, #15, Scottsdale, AZ 85257

Type of Business (restaurant, bar, grocery, retail) 95 + Per Cent Retail

Total Gross Square Footage of Establishment: 5672 with new proposed Reserve Room

Was there a previous business at this location? ☒ Yes ☐ No

If **yes**, list the previous business: AZ WINE Co.

Was liquor sold at this location prior to this application? ☐ Yes ☒ No

If **yes**, what type of license? Type 6

Is this business currently open? ☒ Yes ☐ No

If **yes**, is this business operating with an Interim license? ☐ Yes ☒ No

If **no**, what is the proposed opening date? It is operating right now with Type 6

Is this business under construction or being remodeled? ☐ Yes ☒ No

Does this business have an existing patio? ☐ Yes ☒ No Dimensions of patio _____

Does this business have a proposed patio? ☐ Yes ☒ No Dimensions of patio _____

How many parking spaces are allocated to your business? _____

For Restaurants, Bars and Restaurants/Bars:

Will the bar service area be in excess of 15% of the gross floor area? ☐ Yes* ☒ No

Will the kitchen be less than 15% of the gross floor area? ☒ Yes* ☐ No

Will age verification be required/requested for admittance at any time during business operations? ☐ Yes* ☒ No

Is a cover charge required for admittance at any time during business operations? ☐ Yes* ☒ No

Will less than 40% of gross revenues be derived from the sale of prepared food? ☒ Yes* ☐ No

*May require a Conditional Use Permit

During what hours will the establishment provide full kitchen service? Does not

During what hours will the establishment offer liquor sales? 10 AM - 10-pm, sunday 12:00 - 5:00

Gross square footage of kitchen: No Kitchen

(do not include refrigerators or areas used for storage of food or beverages)

Gross square footage of bar service area: 1200

(includes the floor area under indoor and outdoor bars and the floor area behind the bars used for storage, prep and serving of food or drinks)

Planning, Neighborhood and Transportation Division

7447 E. Indian School Road, Suite 105, Scottsdale, AZ 85251 ♦ Phone: 480-312-7000 ♦ Fax: 480-312-7088



Liquor License Questionnaire

Please complete all questions and return within 3 business days.

Will this business feature any of the following:

Patron Dancing?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	Karaoke?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No
Live Bands?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	DJ?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No
Amplified music?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	Games?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No
Adult Entertainment?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	Four or more pool tables?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No
After hours?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No			

***May require a Conditional Use Permit**

Applicant Narrative:

ARS 4-201-G: In all proceedings before the governing body of a city or town, the Board of Supervisors of a County or the Board, the applicant bears the burden of showing that the public convenience requires and that the best interest of the community will be substantially served by the issuance of this license.

- I have the capability, qualifications and reliability to hold a liquor license because:
I have operated this store since 1993. It and its sister store in Carefree are among the
last of the independently owned fine wine shops in Maricopa County with an extensive
Portfolio of rare and exotic, highly rated wines.
- The public convenience requires and the best interest of the community will be substantially served by the issuance of the liquor license because:
AZ Wine is the founder and wine donation procurer for First Press fine wine auction
which benefits Public Radio. It also helps the Atlas Bistro B.Y.O.B. operate by
providing the wines to its customers. Atlas is consistently rated among the top.
- Please describe your business:
AZ WINE CO is a fine wine bottle shop which has wine and beer tastings

The City's forwarding of a recommendation to the AZ Department of Liquor Licenses and Control does not waive and is not a substitute for the Licensee's obligation to comply with all state, local and federal laws, policies and regulations applicable to the license. The Recommendation is not a permit or regulatory approval to hold any events or construct or demolish any improvements. Zoning processes, building permit processes, and similar regulatory requirements may apply to Licensee's contemplated improvements and are completely separate from the Recommendation. Licensee shall be responsible to, separate and apart from this Recommendation, directly obtain all necessary permits and approvals from any and all governmental or other entities including the City's having standing or jurisdiction over the subject areas. For more information regarding zoning processes, building permit processes, and similar regulatory requirements and approvals please call 480-312-2611.

Print Name: Raymond H. Klemp Signature: Raymond H. Klemp Date: Sept 9, 2011

Submit

Planning, Neighborhood and Transportation Division

7447 E. Indian School Road, Suite 105, Scottsdale, AZ 85251 • Phone: 480-312-7000 • Fax: 480-312-7088

Arizona Department of Liquor Licenses and Control
800 West Washington, 5th Floor
Phoenix, Arizona 85007
www.azliquor.gov
602-542-5141

APPLICATION FOR LIQUOR LICENSE
TYPE OR PRINT WITH BLACK INK

103-LL-2011

Notice: Effective Nov. 1, 1997, All Owners, Agents, Partners, Stockholders, Officers, or Managers actively involved in the day to day operations of the business must attend a Department approved liquor law training course or provide proof of attendance within the last five years. See page 5 of the Liquor Licensing requirements.

SECTION 1 This application is for a:

- ☐ MORE THAN ONE LICENSE
☐ INTERIM PERMIT *Complete Section 5*
☐ NEW LICENSE *Complete Sections 2, 3, 4, 13, 14, 15, 16*
☒ PERSON TRANSFER (Bars & Liquor Stores ONLY)
Complete Sections 2, 3, 4, 11, 13, 15, 16
☒ LOCATION TRANSFER (Bars and Liquor Stores ONLY)
Complete Sections 2, 3, 4, 12, 13, 15, 16
☐ PROBATE/WILL ASSIGNMENT/DIVORCE DECREE
Complete Sections 2, 3, 4, 9, 13, 16 (fee not required)
☐ GOVERNMENT *Complete Sections 2, 3, 4, 10, 13, 15, 16*

SECTION 2 Type of ownership:

- ☐ J.T.W.R.O.S. *Complete Section 6*
☐ INDIVIDUAL *Complete Section 6*
☐ PARTNERSHIP *Complete Section 6*
☐ CORPORATION *Complete Section 7*
☒ LIMITED LIABILITY CO. *Complete Section 7*
☐ CLUB *Complete Section 8*
☐ GOVERNMENT *Complete Section 10*
☐ TRUST *Complete Section 6*
☐ OTHER (Explain) _____

SECTION 3 Type of license and fees LICENSE #(s): 07070160

1. Type of License(s): Type 7

2. Total fees attached:

Department Use Only
\$ 200.00

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE.

The fees allowed under A.R.S. 44-6852 will be charged for all dishonored checks.

SECTION 4 Applicant

1. Owner/Agent's Name: Mr. Klemp Raymond Haw
(Insert one name ONLY to appear on license) Last First Middle
2. Corp./Partnership/L.L.C.: AZ Wine Company, Paradise Valley Wine Outlet, LLC
(Exactly as it appears on Articles of Inc. or Articles of Org.)
3. Business Name: AZ Wine Co
(Exactly as it appears on the exterior of premises)
4. Principal Street Location 2515 N Scottsdale Rd. # 15 Scottsdale Maricopa 85257
(Do not use PO Box Number) City County Zip
5. Business Phone: 480-423-9305 Daytime Contact: 480 423-9305
6. Is the business located within the incorporated limits of the above city or town? ☒ YES ☐ NO
7. Mailing Address: 2515 N Scottsdale Road. #15. Scottsdale, AZ 85257
City State Zip
8. Price paid for license only bar, beer and wine, or liquor store: Type 7 \$ 10,000 Type _____ \$ _____

DEPARTMENT USE ONLY

Fees: 200.00
Application Interim Permit Agent Change Club Finger Prints \$ 200.00
TOTAL OF ALL FEES

Is Arizona Statement of Citizenship & Alien Status For State Benefits complete? ☒ YES ☐ NO

Accepted by: [Signature] Date: 8/31/11 Lic. # 07070160

SECTION 5 Interim Permit:

1. If you intend to operate business when your application is pending you will need an Interim Permit pursuant to A.R.S. 4-203.01.
2. There **MUST** be a valid license of the same type you are applying for currently issued to the location.
3. Enter the license number currently at the location. _____
4. Is the license currently in use? ☐ YES ☐ NO If no, how long has it been out of use? _____

ATTACH THE LICENSE CURRENTLY ISSUED AT THE LOCATION TO THIS APPLICATION.

I, _____, declare that I am the CURRENT OWNER, AGENT, CLUB MEMBER, PARTNER,
(Print full name)
MEMBER, STOCKHOLDER, OR LICENSEE (circle the title which applies) of the stated license and location.

X _____ State of _____ County of _____
(Signature)
The foregoing instrument was acknowledged before me this
_____ day of _____, _____
Day Month Year
My commission expires on: _____
(Signature of NOTARY PUBLIC)

SECTION 6 Individual or Partnership Owners:

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 PROCESSING FEE FOR EACH CARD.

1. Individual:

Last	First	Middle	% Owned	Mailing Address	City	State	Zip

Partnership Name: (Only the first partner listed will appear on license) _____

General-Limited	Last	First	Middle	% Owned	Mailing Address	City	State	Zip
<input type="checkbox"/> <input type="checkbox"/>								
<input type="checkbox"/> <input type="checkbox"/>								
<input type="checkbox"/> <input type="checkbox"/>								
<input type="checkbox"/> <input type="checkbox"/>								

(ATTACH ADDITIONAL SHEET IF NECESSARY)

2. Is any person, other than the above, going to share in the profits/losses of the business? ☐ YES ☐ NO
If Yes, give name, current address and telephone number of the person(s). Use additional sheets if necessary.

Last	First	Middle	Mailing Address	City, State, Zip	Telephone#

SECTION 7 Corporation/Limited Liability Co.:

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 PROCESSING FEE FOR EACH CARD.

☐ CORPORATION **Complete questions 1, 2, 3, 5, 6, 7, and 8.**

☒ L.L.C. **Complete 1, 2, 4, 5, 6, 7, and 8.**

1. Name of Corporation/L.L.C.: AZ Wine Companv. paradise Valley Wine Outlet. LLC
(Exactly as it appears on Articles of Incorporation or Articles of Organization)
2. Date Incorporated/Organized: 2/21/1996 State where Incorporated/Organized: Arizona
3. AZ Corporation Commission File No.: L-0765319-2 Date authorized to do business in AZ: 2/21/1996
4. AZ L.L.C. File No: L-0765319-2 Date authorized to do business in AZ: 2/21/1996
5. Is Corp./L.L.C. Non-profit? ☐ YES ☒ NO
6. List all directors, officers and members in Corporation/L.L.C.:

Last	First	Middle	Title	Mailing Address	City State Zip
Klemp	Raymond	Haw	Managing Member	7800 N. El Arroyo Road. Paradise Vv.	AZ

(ATTACH ADDITIONAL SHEET IF NECESSARY)

7. List stockholders who are controlling persons or who own 10% or more:

Last	First	Middle	% Owned	Mailing Address	City State Zip
Klemp	Raymond	Haw	100	7800 N El Arroyo Road. Paradise Vy.	AZ85253

(ATTACH ADDITIONAL SHEET IF NECESSARY)

8. If the corporation/L.L.C. is owned by another entity, attach a percentage of ownership chart, and a director/officer/member disclosure for the parent entity. Attach additional sheets as needed in order to disclose personal identities of all owners.

SECTION 8 Club Applicants:

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 PROCESSING FEE FOR EACH CARD.

1. Name of Club: _____ Date Chartered: _____
(Exactly as it appears on Club Charter or Bylaws) (Attach a copy of Club Charter or Bylaws)

2. Is club non-profit? ☐ YES ☐ NO

3. List officer and directors:

Last	First	Middle	Title	Mailing Address	City State Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

SECTION 9 Probate, Will Assignment or Divorce Decree of an existing Bar or Liquor Store License:

1. Current Licensee's Name: _____
(Exactly as it appears on license) Last First Middle
2. Assignee's Name: _____
Last First Middle
3. License Type: _____ License Number: _____ Date of Last Renewal: _____
4. ATTACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL, PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE DECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION.

SECTION 10 Government: (for cities, towns, or counties only)

1. Governmental Entity: _____
2. Person/designee: _____
Last First Middle Contact Phone Number

A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

SECTION 11 Person to Person Transfer:

Questions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY-Series 06,07, and 09).

1. Current Licensee's Name: _____ Entity: _____
(Exactly as it appears on license) Last First Middle (Indiv., Agent, etc.)
2. Corporation/L.L.C. Name: _____
(Exactly as it appears on license)
3. Current Business Name: _____
(Exactly as it appears on license)
4. Physical Street Location of Business: Street _____
City, State, Zip _____
5. License Type: _____ License Number: _____
6. Current Mailing Address: _____
(Other than business) Street _____
City, State, Zip _____
7. Have all creditors, lien holders, interest holders, etc. been notified of this transfer? ☐ YES ☐ NO
8. Does the applicant intend to operate the business while this application is pending? ☐ YES ☐ NO If yes, complete Section 5 of this application, attach fee, and current license to this application.

9. I, Mary Helen Baron, hereby authorize the department to process this application to transfer the
(print full name)
privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of these conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue.

I, Mary Helen Baron, declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNER
(print full name)
STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are true, correct, and complete.

X _____
(Signature of CURRENT LICENSEE)

State of _____ County of _____
The foregoing instrument was acknowledged before me this
_____ day of _____
Day Month Year

My commission expires on: _____

(Signature of NOTARY PUBLIC)

SECTION 9 Probate, Will Assignment or Divorce Decree of an existing Bar or Liquor Store License:

1. Current Licensee's Name: _____
(Exactly as it appears on license) Last First Middle
2. Assignee's Name: _____
Last First Middle
3. License Type: _____ License Number: _____ Date of Last Renewal: _____
4. ATTACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL, PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE DECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION.

SECTION 10 Government: (for cities, towns, or counties only)

1. Governmental Entity: _____
2. Person/designee: _____
Last First Middle Contact Phone Number

A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

SECTION 11 Person to Person Transfer:

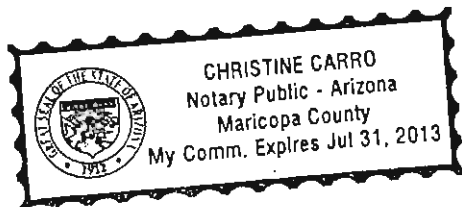
Questions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY-Series 06,07, and 09).

1. Current Licensee's Name: Baron Mary Helen Entity: Agent
(Exactly as it appears on license) Last First Middle (Indiv., Agent, etc.)
2. Corporation/L.L.C. Name: Pizza Hut of America, Inc.
(Exactly as it appears on license)
3. Current Business Name: Pizza Hut #203022
(Exactly as it appears on license)
4. Physical Street Location of Business: Street 60 N. Gilbert Rd.
City, State, Zip Mesa, AZ 85203
5. License Type: 07/Beer & Wine Bar License Number: 07070160
6. Current Mailing Address: Street 14841 Dallas Pkwy
(Other than business) City, State, Zip Dallas, TX 75240
7. Have all creditors, lien holders, interest holders, etc. been notified of this transfer? ☒ YES ☐ NO
8. Does the applicant intend to operate the business while this application is pending? ☐ YES ☒ NO If yes, complete Section 5 of this application, attach fee, and current license to this application.
9. I, Mary Baron, hereby authorize the department to process this application to transfer the
(print full name)
privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of these conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue.
- I, Mary Baron, declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNER
(print full name)
STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are true, correct, and complete.

X Mary Baron
(Signature of CURRENT LICENSEE)

My commission expires on: 7.31.2013

State of AZ County of Maricopa
The foregoing instrument was acknowledged before me this
20 day of Aug 2010
Day Month Year
Christine Carro
(Signature of NOTARY PUBLIC)



STATE OF ARIZONA
DEPARTMENT OF LIQUOR LICENSES
AND CONTROL
ALCOHOLIC BEVERAGE LICENSE

License 07070160

Issue Date: 1/1/1986

Expiration Date: 2/29/2012

Issued To:

MARY HELEN BARON, Agent
PIZZA HUT OF AMERICA INC, Owner

Beer & Wine Bar

Mailing Address:

MARY HELEN BARON
PIZZA HUT OF AMERICA INC
PIZZA HUT #203022
14841 DALLAS PKWY
DALLAS, TX 75240

Location:

PIZZA HUT #203022
60 N GILBERT RD
MESA, AZ 85203

INACTIVE

EXP 2/29/2012

POST THIS LICENSE IN A CONSPICUOUS PLACE



Bill of Sale

IN CONSIDERATION OF THE SUM OF:

*** Ten Thousand Dollars And No Cents ***lawful currency of the United States of America, and other valuable consideration, receipt of which is hereby acknowledged, the SELLER:

BBH Food, LLC, a Delaware Limited Liability Company

hereby grants, bargains, sells and transfers unto the BUYER:

AZ Wine Company, Paradise Valley Wine Outlet, LLC, an Arizona Limited Liability Company

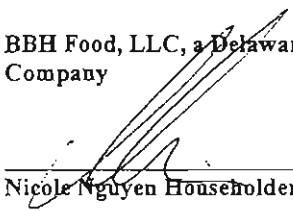
and his, her or their heirs, personal representatives, or assigns, to have and to hold forever, the following described personal property, goods or chattels:

That certain State of Arizona Liquor License #07070160

FURTHERMORE, Seller warrants that he, she or they are the lawful owner of said goods and hereby certifies, under oath, that he, she or they have good right to sell the same as aforesaid, and that the above described property is free and clear of all claims, liens and other encumbrances whatsoever, EXCEPT, as specified herein. Seller further agrees to warrant and defend same against the lawful claims and demands of all persons whomsoever.

DATED: August 5, 2011

BBH Food, LLC, a Delaware Limited Liability Company

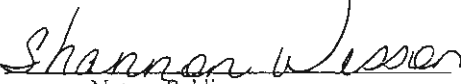


Nicole Nguyen Householder, Manager

State of Texas) ss:
County of Collin

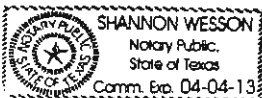
On August 5, 2011, before me, the undersigned, a Notary Public in and for said County and State, personally appeared Nicole Nguyen Householder, Manager personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.



Notary Public

Escrow No.: 00111289



Bill of Sale

11 FEB 21 10:14 PM 2010

IN CONSIDERATION OF THE SUM OF:

For the sum of One Dollar (\$1.00) and other due considerationlawful currency of the United States of America, and other valuable consideration, receipt of which is hereby acknowledged, the SELLER:

Pizza Hut of America, Inc., a Delaware Corporation

Hereby grants, bargains, sells and transfers unto the BUYER:

BBH Food, L.L.C.

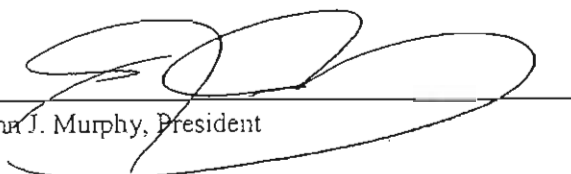
And his, her or their heirs, personal representatives, or assigns, to have and to hold forever, the following described personal property, goods or chattels:

That certain State of Arizona Liquor License #: 07070160

FURTHERMORE, Seller warrants that he, she or they are the lawful owner of said goods and hereby certifies, under oath, that he, she or they have good right to sell the same as aforesaid, and that the above described property is free and clear of all claims, liens and other encumbrances whatsoever, EXCEPT, as specified herein, Seller further agrees to warrant and defend same against the lawful claims and demands of all persons whomsoever.

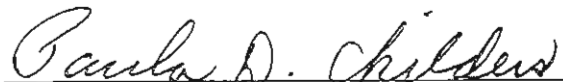
DATED: March 22, 2010

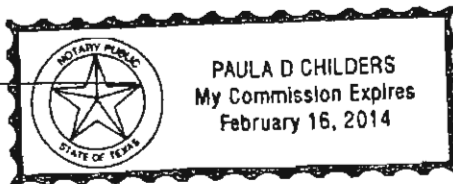
Pizza Hut of America, Inc., a Delaware Corporation


John J. Murphy, President

State of TEXAS }ss:
County of Dallas

On March 22, 2010 before me the undersigned, a Notary Public in and for said County and State, personally appeared John J. Murphy President personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signatures(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.


Notary Public



SECTION 12 Location to Location Transfer: (Bars and Liquor Stores ONLY)

APPLICANTS CANNOT OPERATE UNDER A LOCATION TRANSFER UNTIL IT IS APPROVED BY THE STATE

1. Current Business: Name Pizza Hut #203022
(Exactly as it appears on license) Address 60 N. Gilbert Rd, Mesa, AZ 85203
2. New Business: Name AZ Wine Co.
(Physical Street Location) Address 2515 N. Scottsdale Rd #15, Scottsdale, AZ 85257
3. License Type: 07 License Number: 07070160
4. If more than one license to be transferred: License Type: _____ License Number: _____
5. What date do you plan to move? already open for business What date do you plan to open? already open for bus

SECTION 13 Questions for all in-state applicants excluding those applying for government, hotel/motel, and restaurant licenses (series 5, 11, and 12):

A.R.S. § 4-207 (A) and (B) state that no retailer's license shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a church, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12) or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building. The above paragraph DOES NOT apply to:

- a) Restaurant license (§ 4-205.02) c) Government license (§ 4-205.03)
b) Hotel/motel license (§ 4-205.01) d) Fenced playing area of a golf course (§ 4-207 (B)(5))

1. Distance to nearest school: 2500 ft. Name of school Coronado High School
Address 2501 N. 47 th Street, Scottsdale, AZ 85257
City, State, Zip
2. Distance to nearest church: 650 ft. Name of church Scottsdale Baptist Church
Address 2500 N. Scottsdale Road, Scottsdale, Az 85257
City, State, Zip
3. I am the: ☐ Lessee ☐ Sublessee ☒ Owner ☐ Purchaser (of premises)
4. If the premises is leased give lessors: Name _____
Address _____
City, State, Zip
- 4a. Monthly rental/lease rate \$ _____ What is the remaining length of the lease ___ yrs. ___ mos.
- 4b. What is the penalty if the lease is not fulfilled? \$ _____ or other _____
(give details - attach additional sheet if necessary)
5. What is the total **business** indebtedness for this license/location excluding the lease? \$ 340,000.00
Please list debtors below if applicable.

Last	First	Middle	Amount Owed	Mailing Address	City State	Zip
MSB2010.	LLC		340.000	230 Cross Keys Ofc Park.Fairport.	NY 1445	
						14450

(ATTACH ADDITIONAL SHEET IF NECESSARY)

6. What type of business will this license be used for (be specific)? Retail Wine Store and tasting room

SECTION 13 - continued

7. Has a license or a transfer license for the premises on this application been denied by the state within the past one (1) year?
☐ YES ☒ NO If yes, attach explanation.
8. Does any spirituous liquor manufacturer, wholesaler, or employee have any interest in your business? ☐ YES ☒ NO
9. Is the premises currently licensed with a liquor license? ☒ YES ☐ NO If yes, give license number and licensee's name:

License # 06070181 (exactly as it appears on license) Name Raymond Haw Klemp

SECTION 14 Restaurant or hotel/motel license applicants:

1. Is there an existing restaurant or hotel/motel liquor license at the proposed location? ☐ YES ☒ NO
If yes, give the name of licensee, Agent or a company name:
_____ and license #: _____
Last First Middle
2. If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application.
3. All restaurant and hotel/motel applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor Licenses and Control.
4. As stated in A.R.S. § 4-205.02.G.2, a restaurant is an establishment which derives at least 40 percent of its gross revenue from the sale of food. Gross revenue is the revenue derived from all sales of food and spirituous liquor on the licensed premises. By applying for this ☐ hotel/motel ☐ restaurant license, I certify that I understand that I must maintain a minimum of 40 percent food sales based on these definitions and have included the Restaurant Hotel/Motel Records Required for Audit (form LIC 1013) with this application.

applicant's signature

As stated in A.R.S. § 4-205.02 (B), I understand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule an inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patio barriers are in place on the licensed premises. With the exception of the patio barriers, these items are not required to be properly installed for this inspection. Failure to schedule an inspection will delay issuance of the license. If you are not ready for your inspection 90 days after filing your application, please request an extension in writing, specify why the extension is necessary, and the new inspection date you are requesting. To schedule your site inspection visit www.azliquor.gov and click on the "Information" tab.

applicants initials

SECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form)

1. Check ALL boxes that apply to your business:
- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Entrances/Exits | <input checked="" type="checkbox"/> Liquor storage areas | <input checked="" type="checkbox"/> Ratio: <input checked="" type="checkbox"/> Contiguous |
| <input type="checkbox"/> Service windows | <input type="checkbox"/> Drive-in windows | <input type="checkbox"/> Non Contiguous |
2. Is your licensed premises currently closed due to construction, renovation, or redesign? ☐ YES ☒ NO
If yes, what is your estimated opening date? _____
month/day/year
3. Restaurants and hotel/motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including the locations of all kitchen equipment and dining furniture. Diagram paper is provided on page 7.
4. The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spiritous liquor is to be sold, served, consumed, dispensed, possessed, or stored on the premises unless it is a restaurant (see #3 above).
5. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed premises, such as parking lots, living quarters, etc.

As stated in A.R.S. § 4-207.01(B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to boundaries, entrances, exits, added or deleted doors, windows or service windows, or increase or decrease to the square footage after submitting this initial drawing.

RHK
applicants initials

4. In this diagram please show only the area where spirituous liquor is to be sold, served, consumed, dispensed, possessed or stored. It must show all entrances, exits, interior walls, bars, bar stools, hi-top tables, dining tables, dining chairs, the kitchen, dance floor, stage, and game room. Do not include parking lots, living quarters, etc. When completing diagram, North is up ↑.

If a legible copy of a rendering or drawing of your diagram of premises is attached to this application, please write the words "diagram attached" in box provided below.

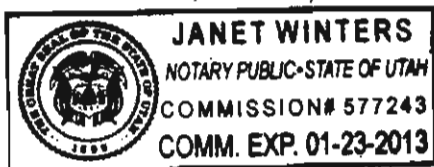
Diagram Attached

00240007020011

SECTION 16 Signature Block

I, Raymond H. Klemf, hereby declare that I am the OWNER/AGENT filing this application as stated in Section 4, Question 1. I have read this application and verify all statements to be true, correct and complete.

x Raymond H. Klemf
(signature of applicant listed in Section 4, Question 1)



State of Utah County of Wasatch

The foregoing instrument was acknowledged before me this

23rd of August, 2011
Day Month Year

My commission expires on: 1-23-2013
Day Month Year

Janet Winters
signature of NOTARY PUBLIC

Door to Atlas
BYOB

N

Liquor
Storage

250 sq ft

Existing AZ WINE Premises

Sales Area

Gross store area 4544 sq ft

Entrance & exit

Entrance & exit

Liquor
Storage

119 sq ft

Bar Seating

Entrance & exit

Entrance & exit

Bar

Mo

Mens and Womens
Bathrooms

Future expansion to reserve room

24 X 47 application in to City of Scottsdale

Future sales area 1128 Sq Ft

Entrance & exit

unlicensed office area

2014 AUG 21 1:49 PM 2140

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(602) 542-5141

QUESTIONNAIRE

FD current
ms 12/2009
P1023345

Attention all Local Governing Bodies: Social Security and Birthdate Information is Confidential. This information may be given to local law enforcement agencies for the purpose of background checks only but must be blocked to be unreadable prior to posting or any public view.

Read carefully. This instrument is a sworn document. Type or print with BLACK INK.
An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT, OR MANAGER. EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD WHICH MAY BE OBTAINED AT DLLC. FINGERPRINTING MUST BE DONE BY A BONA FIDE LAW ENFORCEMENT AGENCY OR A FINGERPRINTING SERVICE APPROVED BY DLLC. THE DEPARTMENT DOES NOT PROVIDE THIS SERVICE.

Effective 10/01/07 there is a \$24.00 processing fee for each fingerprint card submitted.

The fees allowed by A.R.S. § 44-6852 will be charged for all dishonored checks.

Liquor License #

~~00070181~~ **07070160**

(If the location is currently licensed)

1. Check appropriate box → ☒ **Controlling Person** (Complete Questions 1-19) ☒ **Agent** (Complete All Questions except # 14, 14a & 21) ☐ **Manager (Only)** (Complete All Questions except # 14, 14a & 21)
Controlling Person or Agent must complete #21 for a Manager Controlling Person or Agent must complete # 21

2. Name: Klemp Raymond Haw Date of Birth [REDACTED]
Last First Middle (NOT a Public Record)

3. Social Security Number [REDACTED] Drivers License [REDACTED] State: AZ
(NOT a public record) (NOT a public record)

4. Place of Birth: Fayetteville NC USA Height 6'2" Weight 220 Eyes: Bm Hair: Gray
City State Country (not county)

5. Marital Status ☐ Single ☒ Married ☐ Divorced ☐ Widowed Daytime Contact Phone: 480-577-1737

6. Name of Current or Most Recent Spouse: Klemp Carol Ann Hilson Date of [REDACTED]
(List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden (NOT a public record)

7. You are a bona fide resident of what state? Arizona If Arizona, date of residence: [REDACTED]

8. Telephone number to contact you during business hours for any questions regarding this document. 480-905-9209

9. If you have been an Arizona resident for less than three (3) months, submit a copy of your Arizona driver's license or voter registration card.

10. Name of Licensed Premises: Wishnie Plaza, AZ WINE Co Premises Phone: 480-423-9305

11. Physical Location of Licensed Premises Address: 2515 N. Scottsdale Road, #15, Scottsdale, Maricopa, 85257
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years. If unemployed part of the time, list those dates. List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (street address, city, state & zip)
3/2000	CURRENT	Owner, AZ Wine Co	2515 N. Scottsdale Rd #15 Scottsdale, AZ 85257

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↑

13. Indicate your residence address for the last five (5) years: ↓

FROM Month/Year	TO Month/Year	Rent or Own	RESIDENCE Street Address If rented, attach additional sheet with name, address and phone number of landlord	City	State	Zip
3//2001	CURRENT		7800 N El Arroyo Road, Paradise Valley, AZ 85253	P.V.	AZ	85253

If you checked the Manager box on the front of this form skip to # 15

14. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?
If you answered YES, how many hrs/day? four, and answer #14a below. If NO, skip to #15. ☒ YES ☐ NO
- 14a. Have you attended a DLLC-approved Liquor Law Training Course within the past 5 years? (Must provide proof)
If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license. ☒ YES ☐ NO
15. Have you been detained, cited, arrested, indicted or summoned into court for violation of ANY law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past ten (10) years (include only traffic violations that were alcohol and/or drug related)? ☐ YES ☒ NO
16. Are there ANY administrative law citations, compliance actions or consents, criminal arrest, indictments or summonses PENDING against you or ANY entity in which you are now involved? ☐ YES ☒ NO
17. Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor application or license rejected, denied, revoked, suspended or fined in this or any other state? ☒ YES ☐ NO
18. Has anyone EVER filed suit or obtained a judgment against you, the subject of which involved fraud or misrepresentation? ☐ YES ☒ NO
19. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director or manager on any other liquor license in this or any other state? ☒ YES ☐ NO

If any answer to Questions 15 through 19 is "YES" YOU MUST attach a signed statement.
Give complete details including dates, agencies involved, and dispositions.

SUBSTANTIVE CHANGES TO THIS APPLICATION WILL NOT BE ACCEPTED

20. I, Raymond Haw Klemf, hereby declare that I am the APPLICANT/REPRESENTATIVE
(print full name of Applicant)
filing this questionnaire. I have read this questionnaire and all statements are true, correct and complete.

x Raymond H. Klemf
(Signature of Applicant)

State of Utah County of Wasatch

The foregoing instrument was acknowledged before me this
23rd day of August, 2011
Month Year



1-23-2013
Day Month Year

Janet Winters
(Signature of NOTARY PUBLIC)

**COMPLETE THIS SECTION ONLY IF YOU ARE A CONTROLLING PERSON OR AGENT
APPROVING A MANAGER'S APPLICATION**

21. The applicant hereby authorizes the person named on this questionnaire to act as manager for the named liquor license.
The manager named must be at least 21 years of age.

State of _____ County of _____

The foregoing instrument was acknowledged before me this

x _____
Signature of Controlling Person or Agent (circle one)

_____ day of _____, _____
Month Year

Print Name

(Signature of NOTARY PUBLIC)

My commission expires on: _____
Day Month Year

11 AUG 31 10:16 AM '08

Citations and Correcting additions to the AZ WINE Employees Manual.

Violation dated June 7, 2008: Licensee/employee authorized liquor removed from premises in broken package.

Person who removed the liquor was investigator from AZ DLLC.

Change to Employee Policy Manual: Anyone who purchases a bottle of wine for consumption on AZ WINE's premises (hereafter a "Patron:), and who consumes food to accompanyhis purchase, may remove his/her bottle from the premises by replacing the cork/closure on the bottle and taking the bottle with them from the premises.

If the Patron is drinking a bottle of wine unaccompanied by a meal and wishes to remove the bottle prior to finishing it, he must be informed he cannot do so. He may:

1. Order a meal and may then be allowed to remove the bottle after the meal has arrived.
2. Finish consuming the bottle.
3. Return it to his server who must immediately dispose of its contents by pouring it down the drain.
4. If the patron is inebriated after finishes the bottle offer to get him a taxi.

Violation Dated June 7, 2008: Employee consuming on duty.

When on duty an employee of AZ WINE may not sample and spit while behind the bar or while behind the counter in the cash register area.

When on duty an employee may sample and spit when situated at a tasting area in the open floor area.

Under no circumstances may the employee swallow wine or other spiritous product he is sampling while on duty.

An off duty employee may participate in any wine event held at AZ WINE, e.g. tasting or dinner.

Violation Dated June 9, 2008: Storage on unlicensed Premises.

In the event wine is deemed to be defective, and, failing in all attempts to obtain a credit from the distributor, It must be:

1. Disposed of in a dumpster.
2. Sold or given to a Series 1 license holder for recycling.

Raymond H. Klump

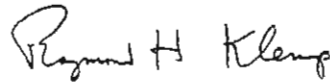
#19

11 AUG 31 10:14 PM '11

August 30, 2011

To Whom It May Concern

I, Raymond Haw Klemp, have owned a 50% interest in AZ Wine Outlet Party Rentals and Appliances LLP, since 2007. The store is located at 15001 N. Hayden Road, Suite 109, Scottsdale, Arizona. The liquor license number is 07070160. That store has just closed for business.



Raymond H. Klemp



**ARIZONA STATEMENT OF CITIZENSHIP
AND ALIEN STATUS FOR STATE PUBLIC BENEFITS**

Professional License and Commercial License

Department of Liquor Licenses and Control

Liquor License #: ~~00070104~~ 07070160

Ownership Name: AZ Wine Company, paradise Valley Wine Outlet, LLC
(as listed on the current liquor license application or renewal application)

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 1-501 requires, in general, that a person applying for a license must submit documentation to the licensing agency that satisfactorily demonstrates that the applicant is lawfully present in the United States.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III. Submit this completed form and copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal.

SECTION I — APPLICANT INFORMATION

APPLICANT'S NAME (Print or type) Raymond Haw Klemp DATE August 23, 2011

TYPE OF APPLICATION (check one) ☒ INITIAL APPLICATION ☐ RENEWAL

TYPE OF LICENSE Type 7

SECTION II — CITIZENSHIP OR NATIONAL STATUS DECLARATION

Directions: Attach a legible copy of the front, and the back (if any), of a document from the attached List A or other document that demonstrates U.S. citizenship or nationality. Name of document provided: US Passport

A. Are you a citizen or national of the United States? (check one) ☒ Yes ☐ No

B. If the answer is "Yes," where were you born? List city, state (or equivalent), and country.

City Fayetteville State (or equivalent) NC Country or Territory USA

If you are a citizen or national of the United States, go to Section IV. If you are not a citizen or national of the United States, please complete Sections III and IV.

SECTION III — ALIEN STATUS DECLARATION

Directions: To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of the front, and the back (if any), of a document from the attached List B or other document that evidences your status. A.R.S. § 1-501. Name of document provided: _____.

“Qualified Alien” Status (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- ☐ 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA).
- ☐ 2. An alien who is granted asylum under Section 208 of the INA.
- ☐ 3. A refugee admitted to the United States under Section 207 of the INA.
- ☐ 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- ☐ 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- ☐ 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- ☐ 7. An alien who is a Cuban and Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980).
- ☐ 8. An alien who is, or whose child or child's parent is a “battered alien” or an alien subjected to extreme cruelty in the United States.

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

- ☐ 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C. § 1101 et seq.] Nonimmigrants are persons who have temporary status for a specific purpose. See 8 U.S.C. § 1101(a)(15).

Alien Paroled into the United States For Less Than One Year (8 U.S.C. § 1621(a)(3))

- ☐ 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA.

Other Persons (8 U.S.C. § 1621(c)(2)(A) and (C))

- ☐ 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- ☐ 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 *et seq.*];
- ☐ 13. A foreign national not physically present in the United States.

Otherwise Lawfully Present (A.R.S. § 1-501)

- ☐ 14. A person not described in categories 1–13 who is otherwise lawfully present in the United States. PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).

SECTION IV — DECLARATION

All applicants must complete this section. I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge.

Raymond H. Klemp
APPLICANT'S SIGNATURE

Aug 23 2011
TODAY'S DATE

Arizona Department of Liquor Licenses and Control
800 West Washington, 5th Floor
Phoenix, Arizona 85007
www.azliquor.gov
602-542-5141

09 OCT 22 199, Lic. RM1043

11 AUG 31 199, Lic. RM201

CERTIFICATE OF TITLE 4 TRAINING COMPLETION

Do Not Duplicate This Form
Certificates must be completed by a state-approved training course provider, in black ink, on an original form.

Raymond Haw Klemp
Full Name (please print)
Raymond Haw Klemp
Signature

OCTOBER 21, 2009
Training Completion Date
BASIC Exp: 10/20/2012
MGT. Exp: 10/20/2014
Certificate Expiration Date
(MANAGEMENT - 5 years from completion date)
(BASIC - 3 years from completion date)

Type of Training Completed (check Yes or No)

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	BASIC	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	ON SALE
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	MANAGEMENT	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	OFF SALE
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	BOTH	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	OTHER

If Trainee Is Employed By A Licensee

Name of Licensee Business Name Liquor License #

Alcohol Training Program Provider Information

RED MOUNTAIN LIQUOR CONSULTANTS

Company or Individual Name (please print)
P.O. BOX 20882

MESA ARIZONA 85277 (480) 985 8697
City State Zip Daytime Contact Phone #

I certify the above named individual has successfully completed the training specified above in accordance with Arizona Revised Statute, Arizona Administrative Code, and the training course curriculum approved by the Department of Liquor Licenses and Control:

LARRY ELLIGET
Name of Trainer (please print)
[Signature] 10/21/09
Trainer Signature Date

Pursuant to A.R.S. 4-112(G)(2), mandatory Title 4 liquor law training is required prior to the issuance of all new liquor license applications submitted after November 1, 1997.

The persons(s) required to attend both the BASIC and MANAGEMENT Title 4 liquor law training, on- or off-sale, will include all of the following:
Owner(s)
Licensee/agent or manager(s) actively involved in daily business operation

A valid (not expired) Certificate of Title 4 Training Completion must be submitted to the Department of Liquor Licenses and Control before a liquor license application is considered complete.

Before acceptance of a manager's questionnaire and/or agent change for an existing liquor license, proof of attendance for the BASIC and MANAGEMENT Title 4 liquor law training (on- or off-sale) is required.